



ज्ञान हमेशा
बढ़ाते रहो

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Application form for MukhyamantriTirthYatraYojana

1.	Select the route		
2.	Applicant details		
a.	Name of the Applicant		<div style="border: 1px solid black; padding: 10px; width: 100%;"> Passport size photo of applicant </div>
b.	Father's Name		
c.	Full Address		
d.	Date of birth <i>(Age of Applicant must be above 60 years as on 1st January of the year in which the Application is submitted)</i>	<input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/>	
e.	Whether Applicant is a Central/State Government or Local/Autonomous body Employee	<input type="checkbox"/> YES	<input type="checkbox"/> NO
f.	Locality Address (Based on the Locality, particular Constituency and SDM must be auto reflected)		
g.	In case of Emergency/Accident and illness etc the Name and mobile Numbers of the relatives/family members who can be informed	Name	
		Mobile Number	
3.	Applying along with Spouse	<input type="checkbox"/> YES	<input type="checkbox"/> NO
4.	Spouse details (applicable only in case applying along with Spouse)		
a.	Spouse Name		<div style="border: 1px solid black; padding: 10px; width: 100%;"> Passport size photo of Spouse </div>
b.	Spouse Date of birth	<input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/>	
c.	Whether Spouse is a Central/State Government or Local/Autonomous body Employee	<input type="checkbox"/> YES	NO <input type="checkbox"/>
5.	Opting for Attendant (applicable only if applicant is 70yrs or above of age.)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
6.	Attendant details (applicable only incase opting for attendant)		
a.	Attendant Name		<div style="border: 1px solid black; padding: 10px; width: 100%;"> Passport size photo of Attendant </div>
b.	Attendant Date of birth <i>(Age of Attendant must be above 21 years)</i>	<input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/>	

Place

Date

Signature of the applicant

Self Declaration

I....., Resident of

Verify as Under:

1. I am not an employee of Central/State Government/Local or autonomous bodies.
2. I have not availed the scheme in the past. If at any point of time, I am found that I have violated this condition, I shall be liable to repay the entire amount along with a penalty of 25%.
3. If I am unable to undertake the pilgrimage due to any reason whatsoever I will provide intimation to this effect 07 days before the travel date. Otherwise, I shall not be eligible to apply under this scheme again.
4. I am physically/mentally fit to undertake the journey and is not suffering from any serious ailment, communicable disease or mental disease.
5. I will not carry any inflammable material or liquor or any other intoxicating articles or use the same during the yatra.
6. I will be fully responsible for my jewellery and belongings during the yatra.
7. I will behave in a civilized manner as per the requirements of the Tirth Yatra so that the image of the state is not adversely affected.
8. The above contents are correct to the best of my knowledge and belief and nothing has been concealed therein.
9. I further affirm that:
 - I. I am aware that in case the information furnished above is found to be incorrect, I shall be liable for prosecution under section 177, 191 and other relevant/applicable sections of the Indian Penal Code, Section 177 & 191 stipulates as under: -
177. Furnishing False Information- whoever, being legally bound to furnish information on any subject to any public servant, as such, furnishes, as true, information on the subject which he knows or has a reason to believe to be false, shall be punished with simple imprisonment for a term which may extend to six months, or fine which may extend to one thousand rupees, or with both;
Or, if the information which he is legally bound to give respects the commission of an offence, or is required for the purpose of preventing the commission of an offence, or in order to the apprehension of an offender, with imprisonment of either description for a term which may extend to two years, or with fine, or with both.
191. Giving false evidence- Whoever being legally bound by an oath or by an express provision of law to state the truth, or being bound by law to make a declaration upon any subject, makes any statement which is false, and which he either knows or believes to be false or does not believe to be true, is said to give false evidence.
 - II. Providing any false evidence shall be punishable under section 193 of IPC, 1860, which provides imprisonment for a term up to three years and fine.
10. I will follow the instructions of the liaison officer/escorts.
11. *(Applicable if applying along with spouse)*
 - i. I undertake that my spouse will also abide by all the requirements of the journey as mentioned above.

12. *(Applicable if applying along with the attendant)*

- i. I have completed 70 years of age.
- ii. Mr.....(name of the attendant) who will accompany me as attendant is above 21 years of age.
- iii. My attendant will also abide by all the requirements of the journey as mentioned above.

Date:

DD	MM	YYYY
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Applicant Signature:

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Certificate of MLA/Minister/Chairman (Tirath Yatra Vikas Samiti)

This is to certify that Smt. / Sh.....,

Is Resident of the Constituency and his/her Voter Id No is

* This is also to certify that his/her spouse Sh/Smt is also the resident of

the Constituency and his/her Voter Id No is

#This is also to certify that his/her attendant Sh/Smt/Ms is also the

resident of the Constituency and his/her Voter Id No is

Dated:

MLA Signature & Seal/
Signature of Minister, GNCT of Delhi & Seal /
Signature of Chairman , Tirath Yaatra Vikas Samiti GNCT of Delhi & Seal
(In Original)

MLA Constituency:.....

*Required if travelling along with the spouse.

Required if travelling along with the spouse.

(Medical Certificate)

TO WHOMSOEVER IT MAY CONCERN

This is to certify that Shri/Smt Son/Daughter/Husband/Wife of bearing Voter ID NO is physically and mentally fit to undertake the journey <Route for which applying> as on date

(Signature)

(Registered Medical Practitioner)

Name of the Doctor:-

Regd No:-

Stamp

Date

Place